

## **COMMERCIAL BUILDING PERMIT APPLICATION**

CITY OF LONGVIEW

ADDRESS / LOCATION:				PERMIT #					
GENERAL CONTRACTOR:									
PROPERTY OWNER:									
DESCRIPTION OF WORK:									
IS THIS PROJECT:	IS THIS A CORNER LOT?  YES NO IS IT CURRENTLY OCCUPIED?  YES NO # OF STORIES # OF ROOMS  TAS #			MODEL/ADDITION		DEMOLITION			
WILL YOU BE REQUIRING ANY OF THE FOLLOWING TYPES OF WORK THAT REQUIRE PERMITS?  ELECTRIC  PLUMBING  GAS  MECHANICAL  NFPA 13R FIRE SPRINKLER SYSTEM  DEVELOPMENT PERMIT				_	(DEMOLITION ONLY)  I HEREBY CERTIFY THAT AN ASBESTOS SURVEY HAS BEEN PERFORMED IN ACCORDANCE WITH THE TEXAS ASBESTOS EMISSION STANDARDS FOR HAZARDOUS AIR POLLUTANTS (NESHAP) FOR THE AREA(S) BEING RENOVATED AND/OR DEMOLISHED  IF ASBESTOS IS PRESENT AN ABATEMENT LETTER MUST BE PROVIDED  DEMOLITION BASE FEE \$50.00				
LEGAL DESCRIPTION:	LOT	BLOCK					UNI	 T	
OR						ABSTRACT			
FOUNDATION TYPE:		PIER/BEAM	SL <i>i</i>	4B				OTHER	
ROOFING MATERIALS:		COMPW	/OOD	TI	ILE	BUILT UP_		OTHER	
ROOF DESIGN:		TRUSS				CONVENTIONAL			
RETAINING WALL:		CONCRETEKEYSTO			OTHERHEIGH			HEIGHT	
IS THERE AN OIL WELL WIT					YES	□NO			
SQ. FOOTAGE OF PROPOSED PROJECT:					FOR OFFICE USE ONLY				
VALUATION OF WORK:					APPLICATION FEE:				
SIGNATURE:					DATE:				
PHONE NUMBER:					ENTERE	D BY:			
FAX NUMBER:									
EMAIL:									